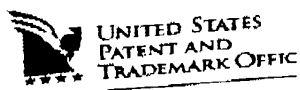


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512 527 0107

P.01



APPLICATION NUMBER
09/905,718

FILING DATE
05/16/200

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Applicant(s)

C. Grant Willson
S. V. Sreenivas
Roger T. Bonne

Domestic Priority data as cl

Foreign Applications

If Required, Foreign Filing I

Projected Publication Date

Non-Publication Request:

Early Publication Request

Title

Method and
electric field

Preliminary Class

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RE:	
U.S. Patent Application No. 09/905,718 Filing Date: May 16, 2002 Group Art Unit: 1762 Attorney Docket No: PA27-02V12	

To Whom It May Concern:

Please find attached the updated Filing Receipt received from the USPTO regarding the above-identified patent application. Red-lined changes have been included on the said filing receipt. As indicated on the enclosed filing receipt, the correspondence address has been updated.

Thank you for your assistance in this matter. If you have any questions or comments, please do not hesitate to contact me.

Sincerely,

Kenneth C. Brooks

KCB:jb

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Bib Data Sheet

CONFIRMATION NO. 2731

SERIAL NUMBER 09/905,718	FILING DATE 05/16/2002 RULE	CLASS 427	GROUP ART UNIT 1762	ATTORNEY DOCKET NO. PA27-02V12	
APPLICANTS Carlton Grant Willson, Austin, TX; Sidlgata V. Sreenivasan, Austin, TX; Roger T. Bonnezaze, Austin, TX;					
** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 07/18/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 65	INDEPENDENT CLAIMS 6
ADDRESS Molecular Imprints, Inc. Legal Department P.O. Box 81536 Austin, TX 78708-1536					
TITLE Method and system for fabricating nanoscale patterns in light curable compositions using an electric field					
FILING FEE RECEIVED 1031	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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